PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number					
	PAIENI		10/689480											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTIT	rv	OR	OTHER		
TC	TAL CLAIMS		20		-			RATE	F	EE]	RATE	FEE	
FC	R		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 38	5.00	OR	BASIC FEE	770.00	
ΤΟ	TAL CHARGEA	BLE CLAIMS	20 minus 20=		• 0			X\$ 9:	-		OR	X\$18=		
INE	EPENDENT CI	LAIMS	3 minus 3 =		95			X43=			OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145:	= -		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	1 7	8.5	OR	TOTAL		
CLAIMS AS AMENDED - PART II 6-17-5 (Column 1) (Column 2) (Column 3)								SMAL	L ENT	ITY	OR	OTHER SMALL		
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER BUSLY	PRESENT EXTRA		RATE	AE TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE	
	Totai	. 20	Minus	d	-	-		X\$ 9=			OR	X\$18=		
	Independent	. 3	Minus	***	3	9		X43=			OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			+145=			OR	+290=		
//-								TOTA	_		\ 	TOTAL ADDIT, FEE		
10	/34/5 (Column 1) (Column 2) (Column 3)							ADDII. FE						
AMENDMENTE		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	AD TIO	NAL		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	-20	9	-		X\$ 9=			OR	X\$18=		
	Independent	• 3	Minus	 3		6		X43=			OR	X86=		
	PHST PHESE	NTATION OF ML	ILTIPLE DEF	ENUENI	CLAIM		'	+145=			OR	+290=		
							L	TOTA	E		OR	YOTAL ADDIT, FEE		
		(Column 1)		(Colum	าภ 2)	(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	_	HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	AD TIOI FE	VAL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		•		X\$ 9=			OR	X\$18=		
	Independent	•	Minus	ARA		=		X43=	1	\dashv	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								}	\dashv	υπ 			
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.											OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR ,	TOTAL ODIT. FEE		
		mber Previously Paid ber Previously Paid					r foui	nd in the a	pproprie	te box	in coh	ımn 1.		